

# The Commonwealth of Massachusetts

Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Medical Use of Marijuana Program
99 Chauncy Street, 11th Floor, Boston, MA 02111

Tel: 617-660-5370 www.mass.gov/medicalmarijuana

# How to Register with the Medical Use of Marijuana Program: Patient Overview

Registering online with the Medical Use of Marijuana Program is the fastest and most convenient way to register to possess marijuana for medical purposes.

If you are unable to register online, a more lengthy paper registration process is available. Please call 617-660-5370 to request the paper forms and learn more.

Please read the following instructions before you begin the patient registration process in the Medical Use of Marijuana Online System (MMJ Online System).

Please note that in order to register as a patient in the MMJ Online System you must first obtain a certification from a qualified health provider.

## PREPARING FOR REGISTRATION

First, in order to register as a patient in the MMJ Online System you will need the following:

- Internet access;
- Access to a scanner, mobile scanning software, <u>or</u> pre-scanned digital copies of the documents (as explained below);
- A printer;
- Your registration number as given to you by your health care provider after they have issued you a certification;
- A valid form of identification (as explained below);
- A photograph of yourself (as explained below); and
- A form of payment, or proof of verified financial hardship (as explained below).

Next, scan and save onto your computer:

- the valid form of identification; and
- the photograph of yourself.

If applying for a registration fee waiver (as explained below), also scan and save onto your computer the proof of verified financial hardship (as explained below).

These documents will be uploaded to the MMJ Online System during the patient registration process.

### Valid Form of Identification

Valid forms of identification include:

- Massachusetts driver's license:
- Massachusetts ID card (with a photograph of yourself);
- US passport AND another document that proves your Massachusetts residence; or
- US military ID AND another document that proves your Massachusetts residence.

Proof of Massachusetts residence may include, but is not limited to:

- A utility bill (gas, electric, telephone, cable, or heating oil), that is less than 60 days old and must contain your name and address;
- Your current Massachusetts motor vehicle registration card with your current address;
- Tuition bill with a due date of less than 6 months ago and addressed to your current address;
- Car insurance policy or bill that is dated less than 60 days old;
- Home mortgage, lease or loan contracts dated within 6 months of today with your name, address and signature;
- Original or certified copy of a U.S. Marriage Certificate dated within the past 6 months;
- A property tax or excise tax bill for the current year with your name and address;
- First-class mail dated less than 60 days old from any federal or state agency that displays your name and address; or
- Current Massachusetts-issued Professional License with your address.

# **Photograph of Yourself**

This photo will be placed on your Program ID card.

Your photo should be:

- In color;
- Uploaded as a square photo;
- Taken within the last 6 months to reflect what you look like now;
- Taken in front of a plain white or off-white background;
- Taken looking directly at the camera;
- Taken without smiling and with both eyes open; and

• Taken in clothing that you normally wear (for example, no clothing item that covers your face or head, except for religious purposes).

Please ensure that your photo is in .jpg or .bmp format with a maximum size of 2 MB.

# **Form of Payment**

There is a \$50 fee to complete a patient registration.

Acceptable forms of payment include:

- Credit card;
- Debit card;
- Bank account number and bank routing number; or
- If you are registering with paper forms, a check or money order payable to "The Commonwealth of Massachusetts". Your check or money order must be included with the paper registration forms.

#### Fee Waiver

If you have a *verified financial hardship*, you may be qualified for a registration fee waiver. You are considered to have a verified financial hardship if you are a recipient of MassHealth, or Supplemental Security Income, or your income does not exceed 300% of the federal poverty level. In order to apply for a registration fee waiver, you must submit proof of verified financial hardship.

Proof of verified financial hardship includes the following:

- MassHealth card;
- Supplemental Security Income (SSI) benefit verification letter;
- Form W-2 from this year or last year;
- State or federal tax return from this year or last year;
- Current (no more than 60 days old) pay stub with employer's name and address and your name and residential address (if you are self-employed, submit your most recent quarterly loss/profit statement);
- SNAP Electronic Benefit Transfer (EBT) statement from the current year;
- Unemployment award letter for the current year; or
- Unemployment check stub for the current year.

## **REGISTRATION PROCESS**

Now that you have been provided with a certification from a qualified health provider and gathered the necessary documents, you may begin the online patient registration process.

You will be sent several emails during the registration process. Each email will have instructions on how to complete the next step. Please note that the links may expire as soon as seven (7)

days after being emailed to you and some links are valid only the first time that you click on the link.

The MMJ Online System times out after 30 minutes. If you would like to take a break during the registration process, a good stopping point is right after you receive a confirmation e-mail and before you click the link in the confirmation e-mail to start the next step of the registration process.

In order to register, please follow these steps:

- **Step 1**: Visit the website of the Virtual Gateway at: https://gateway.hhs.state.ma.us/authn/selfReg.do
- **Step 2**: Once you are on the home page of the Virtual Gateway, fill out the requested information and click on "Medical Use of Marijuana System" next to "Service Name."
- **Step 3**: Follow the instructions sent to you via email and in the Medical Use of Marijuana MMJ Online System.
- **Step 4**: Once your registration is reviewed by the Department, you will be notified by email regarding the status of your registration. Registrations are processed in the order they are received. If approved, you will be able to print your paper Program ID card and will receive your plastic Program ID card at a later date.

## **PROGRAM ID CARD**

You must have your Program ID card as well as the valid form of identification that you used to register in the MMJ Online System <u>at all times</u> when you possess or handle marijuana for medical use.

There is a \$10 fee to replace a lost Program ID card.

## **SELECTING A PERSONAL CAREGIVER**

While registering as a patient, you will be given the option to select a personal caregiver. A personal caregiver is someone who may assist you with your medical use of marijuana.

You may designate up to two caregivers who are not currently designated by another patient, unless that caregiver is your immediate family member.

In order to designate a personal caregiver you will need your caregiver's registration number and last name. Please note that you may also select a caregiver in the future, after completing your patient registration.

If you wish to select a caregiver after completing your patient registration, please follow these steps:

- **Step 1**: Inform your caregiver that he or she must register as a caregiver via the Virtual Gateway at https://gateway.hhs.state.ma.us/authn/selfReg.do.
- **Step 2**: Your caregiver will receive a registration number. Ask your caregiver for that number.
- Step 3: Log into your account on the MMJ Online System.
- **Step 4:** Click on the link "My Caregivers" at the top of the page and follow the instructions.
- **Step 5**: After you designate your caregiver, your caregiver will be sent an email confirming that they have been designated by you as your caregiver.

# **CHANGE OF ADDRESS**

If you move, your address may be updated by calling the Medical Use of Marijuana Program at 617-660-5370.

# **QUESTIONS**

Should you have questions regarding the registration process, please contact the Medical Use of Marijuana Program Support Center at 617-660-5370.